

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Campaign for Working Families

ADDRESS (number and street)

2800 Shirlington Road, Suite 930

☐Check if different
than previously
reported. (ACC)

Arlington

VA

22206

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325076

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2006

through

03

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Amy Myers

Signature of Treasurer

Electronically Filed by Amy Myers

Date

04

19

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Campaign for Working Families

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		982491.24
(b) Cash on Hand at Beginning of Reporting Period	1017085.45	
(c) Total Receipts (from Line 19)	30798.15	138232.03
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1047883.60	1120723.27
7. Total Disbursements (from Line 31)	49453.55	122293.22
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	998430.05	998430.05
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	9230.21	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Campaign for Working Families

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	16095.00	85177.50
(i) Itemized (use Schedule A)		
(ii) Unitemized	11413.23	44182.71
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	27508.23	129360.21
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	27508.23	129360.21
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.03
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3289.92	8871.79
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	30798.15	138232.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30798.15	138232.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	42453.55	110293.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	42453.55	110293.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	5000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	7000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	49453.55	122293.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	49453.55	122293.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	27508.23	129360.21
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27508.23	129360.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	42453.55	110293.22
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.03
38. Net Operating Expenditures (subtract Line 37 from Line 36)	42453.55	110293.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)

MR EMIL J AVEY

Mailing Address RR 1 BOX 564

City State Zip Code
 SAINT GEORGE WV 26287

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.63702

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BLVD N

City State Zip Code
 JACKSONVILLE FL 32225

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMURFIT STORE CONT. CORP

Occupation
GEN MGR

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.63730

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

MR WILLIAM A DIEDRICH, JR

Mailing Address 24467 OLD MEADOW RD

City State Zip Code
 SEAFORD DE 19973

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
PATHOLOGIST

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.63683

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR CRAIG W EGLOFF

Mailing Address 27001 HWY 128
PO BOX 79

City State Zip Code
YORKVILLE CA 95494

FEC ID number of contributing
federal political committee.

C

Name of Employer
JAYMES & JAYMES

Occupation
INSURANCE BROKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.63981

Amount of Each Receipt this Period

400.00

B. Full Name (Last, First, Middle Initial)
MS JEANNE HAAS

Mailing Address 31 MEADOW RUN DR

City State Zip Code
SKILLMAN NJ 08558

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 2 / 2 0 0 6

Transaction ID: SA11A1.63661

Amount of Each Receipt this Period

350.00

C. Full Name (Last, First, Middle Initial)
MRS BABETTE HILL

Mailing Address 157 NE COAL LN

City State Zip Code
TRENTON MO 64683

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOME

Occupation
FAMILY MANAGER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 2 / 2 0 0 6

Transaction ID: SA11A1.63862

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MRS SYLVIA HOLLINGER

Mailing Address 26 HOLLOW RD

City	State	Zip Code
NEW PROVIDENCE	PA	17560

FEC ID number of contributing
federal political committee.

C

Name of Employer
WDAC RADIO COMPANYOccupation
ADMINISTRATIVE ASSISTANT

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	0	6

Transaction ID: SA11A1.63677

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
MR JAMES M JACKSON

Mailing Address PO BOX 2020

City	State	Zip Code
SOUR LAKE	TX	77659

FEC ID number of contributing
federal political committee.

C

Name of Employer
F J BROWN & ASSOC HOUSTON
TXOccupation
RETIRED DRILLING CONSULTANT

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	6

Transaction ID: SA11A1.63908

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
MRS VICKY L JOHNSON

Mailing Address 43449 ELK RUN

City	State	Zip Code
STEAMBOAT SPR	CO	80487

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
PHYSICAL THERAPIST/EDUCATORS

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

Transaction ID: SA11A1.63921

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR FLOYD R JUMP
Mailing Address 350 E HENSCHEN ST

City State Zip Code
GARNER IA 50438

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63804

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
MRS PAULINE H KREIDER
Mailing Address 760 HOSTETTER RD

City State Zip Code
MANHEIM PA 17545

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECD

Occupation
RETIRED

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.63676

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
MR JAMES B LINDSEY, JR
Mailing Address 36 HAMMOND DR

City State Zip Code
SANTA BARBARA CA 93108

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.63971

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A.

Full Name (Last, First, Middle Initial)

MR RAY MATTHEWS

Mailing Address 2700 SEVEN MILE WAY SE

City State Zip Code
 ALBANY OR 97322

FEC ID number of contributing federal political committee.

C

Name of Employer
WAH CHANGOccupation
GAUGE CALIBRATION TECHNICIAN

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.63989

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MS RUTH MERILLAT

Mailing Address 860 RICHLYN DR

City State Zip Code
 ADRIAN MI 49221

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.63796

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD A F NELSON

Mailing Address 193 RYECROFT SE

City State Zip Code
 CEDAR RAPIDS IA 52403

FEC ID number of contributing federal political committee.

C

Name of Employer
CEDAR RAPIDS MEDICAL EDUCATIONOccupation
EDUCATOR

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.63811

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR BRIAN R PARKER
Mailing Address 2514 MEADOW DR

City State Zip Code
ZEELAND MI 49464

FEC ID number of contributing federal political committee.

C

Name of Employer
DONNELLY CORPOccupation
ENGINEER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.63798

Amount of Each Receipt this Period

480.00

B. Full Name (Last, First, Middle Initial)
MR DAVID PARSLEY
Mailing Address 11714 LIPSEY RD

City State Zip Code
TAMPA FL 33618

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
CONSULTING

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.63741

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
MR MIKE RISINGER
Mailing Address 421 E GREENWOOD

City State Zip Code
MORTON IL 61550

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
LAWYER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.63855

Amount of Each Receipt this Period

140.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR BOB SCHMIDT
Mailing Address 13714 VINERY LN

City State Zip Code
CYPRESS TX 77410

FEC ID number of contributing
federal political committee.

C

Name of Employer
POWER CHOKES

Occupation
SALES/ENGINEER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2006

Transaction ID: SA11A1.63903

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
DAVE SCHMITT
Mailing Address 1460 SENECA RD NW

City State Zip Code
SWISHER IA 52338

FEC ID number of contributing
federal political committee.

C

Name of Employer
DAVE SCHMITT CONST G INC.

Occupation
CONTRACTOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 07 / 2006

Transaction ID: SA11A1.63810

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
MRS DEBORAH E SMITH
Mailing Address 3360 E TERRELL BRANCH CT SE

City State Zip Code
MARIETTA GA 30067

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2006

Transaction ID: SA11A1.63717

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

1525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)
MR WILLIAM STIMPSON

Mailing Address 50 MURRAY ST APT 420

City State Zip Code
NEW YORK NY 10007

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEUTSCHE BANK

Occupation
EQUITY OPTIONS TRADER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2006

Transaction ID: SA11A1.63663

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
DR JAMES P SYVRUD

Mailing Address 8225 BRUTON RD

City State Zip Code
DALLAS TX 75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
OWNER & LIBERTY HEALTHCARE

Occupation
CHIROPRACTOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2006

Transaction ID: SA11A1.63886

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
MR RICHARD P TRUDELL

Mailing Address 18 SUNRISE LN

City State Zip Code
GRAND ISLE VT 05458

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 21 / 2006

Transaction ID: SA11A1.63652

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)

MRS KATHLEEN WELD

Mailing Address 29 MAIN ST

City State Zip Code
DOVER MA 02030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 07 / 2006

Transaction ID: SA11A1.63647

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

KAREN WHITEMAN

Mailing Address 4007 NORWOOD ST

City State Zip Code
MIDLAND TX 79707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BURLINGTON RESOURCES

Occupation
GEOLOGIST

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2006

Transaction ID: SA11A1.63919

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

16095.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 26

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

A. Full Name (Last, First, Middle Initial)

ALLFIRST BANK

Mailing Address 1800 K Street

City State Zip Code
 Washington DC 20002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8871.79

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 3 1 / 2 0 0 6

Transaction ID: SA17.64051

Amount of Each Receipt this Period

3289.92

INTEREST INCOME

SUBTOTAL of Receipts This Page (optional)

3289.92

TOTAL This Period (last page this line number only)

3289.92

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

Full Name (Last, First, Middle Initial)

A. AAMP

Mailing Address 9127 ANTIQUE WAY

City
MANASSAS

State
VA

Zip Code
20110

Purpose of Disbursement
PAC - DIRECT MAIL POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.64048

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9500.00

Full Name (Last, First, Middle Initial)

B. ALLFIRST BANK

Mailing Address 1800 K Street

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.64015

Date of Disbursement

/ /

Amount of Each Disbursement this Period

658.72

Full Name (Last, First, Middle Initial)

C. ALLFIRST BANK

Mailing Address 1800 K Street

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.64052

Date of Disbursement

/ /

Amount of Each Disbursement this Period

161.69

SUBTOTAL of Disbursements This Page (optional)

10320.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

Full Name (Last, First, Middle Initial)

A. Gary Bauer

Mailing Address 2800 Shirlington Road

City
Arlington

State
VA

Zip Code
22206

Purpose of Disbursement
CONSULTING - POLITICAL & ADMIN

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64039

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7200.00

Full Name (Last, First, Middle Initial)

B. CAPITOL ADVANTAGE

Mailing Address P.O. 1223

City
McLean

State
VA

Zip Code
22101

Purpose of Disbursement
DUES AND SUBSCRIPTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64030

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. DC Treasurer

Mailing Address P.O. Box 7862

City
Washington

State
DC

Zip Code
20044

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64028

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2744.00

SUBTOTAL of Disbursements This Page (optional)

11444.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

Full Name (Last, First, Middle Initial)

A. DIRECTECH, INC

Mailing Address 8595 Grovemont Circle

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement
CAGING AND DATA ENTRY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64047

Date of Disbursement

03 / 28 / 2006

Amount of Each Disbursement this Period

970.56

Full Name (Last, First, Middle Initial)

B. F&M BANK

Mailing Address 4117 Chain Bridge Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64018

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

987.62

Full Name (Last, First, Middle Initial)

C. F&M BANK

Mailing Address 4117 Chain Bridge Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64027

Date of Disbursement

03 / 17 / 2006

Amount of Each Disbursement this Period

8902.60

SUBTOTAL of Disbursements This Page (optional)

10860.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

Full Name (Last, First, Middle Initial)

A. LEXIS NEXIS

Mailing Address P.O. Box 7247-7090

City
Philadelphia

State
PA

Zip Code
19170

Purpose of Disbursement
DUES & SUBSCRIPTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64026

Date of Disbursement

/ /

Amount of Each Disbursement this Period

321.00

Full Name (Last, First, Middle Initial)

B. MGP Shirlington Gateway

Mailing Address P.O. Box 201630

City
Dallas

State
TX

Zip Code
75320

Purpose of Disbursement
RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64040

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1930.51

Full Name (Last, First, Middle Initial)

C. Bill Moeller

Mailing Address 2800 Shirlington Road #930

City
Arlington

State
VA

Zip Code
22206

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64023

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.58

SUBTOTAL of Disbursements This Page (optional)

2277.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

Full Name (Last, First, Middle Initial)

A. Bill Moeller

Mailing Address 2800 Shirlington Road #930

City Arlington State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - POLITICAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64037

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

2150.00

Full Name (Last, First, Middle Initial)

B. NATIONAL JOURNAL

Mailing Address 1501 M Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
DUES & SUBSCRIPTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64032

Date of Disbursement

03 / 24 / 2006

Amount of Each Disbursement this Period

1597.50

Full Name (Last, First, Middle Initial)

C. RECORDS MGMT INC

Mailing Address 7726 Southern Drive

City Springfield State VA Zip Code 22150

Purpose of Disbursement
STORAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64029

Date of Disbursement

03 / 24 / 2006

Amount of Each Disbursement this Period

160.80

SUBTOTAL of Disbursements This Page (optional)

3908.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

Full Name (Last, First, Middle Initial)

A. US POSTMASTER

Mailing Address Main Post Office

City Washington State DC Zip Code 20000

Purpose of Disbursement
GENERAL OFFICE POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64022

Date of Disbursement

03 / 07 / 2006

Amount of Each Disbursement this Period

48.75

Full Name (Last, First, Middle Initial)

B. US POSTMASTER

Mailing Address Main Post Office

City Washington State DC Zip Code 20000

Purpose of Disbursement
BRE FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64020

Date of Disbursement

03 / 23 / 2006

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

C. US POSTMASTER

Mailing Address Main Post Office

City Washington State DC Zip Code 20000

Purpose of Disbursement
BRE FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64021

Date of Disbursement

03 / 23 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

708.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

Full Name (Last, First, Middle Initial)

A. Dorie Velezis

Mailing Address 2800 Shirlington Road #930

City Arlington State VA Zip Code 22206

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64038

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address P.O. Box 17577

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
TELEPHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64035

Date of Disbursement

/ /

Amount of Each Disbursement this Period

381.27

Full Name (Last, First, Middle Initial)

C. Dean Virag

Mailing Address 14039 Westwind Lane

City Culpeper State VA Zip Code 22701

Purpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.64031

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.00

SUBTOTAL of Disbursements This Page (optional)

2731.27

TOTAL This Period (last page this line number only)

42250.60

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Campaign for Working Families

Full Name (Last, First, Middle Initial)

A. MUSGRAVE FOR CONGRESS

Mailing Address 15484 RD 18 1/2

City
FORT MORGAN

State
CO

Zip Code
80701

Purpose of Disbursement
CONTRIBUTION

Candidate Name
MUSGRAVE FOR CONGRESS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 04

Transaction ID: SB23.64042

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. TOM DELAY CONGRESSIONAL COMMITTEE

Mailing Address 7002 Riverbrook Drive Ste. 200

City
Sugar Land

State
TX

Zip Code
77479

Purpose of Disbursement
CONTRIBUTION

Candidate Name
TOM DELAY CONGRESSIONAL COMMITTEE

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 22

Transaction ID: SB23.64043

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

7000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 24 / 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Campaign for Working Families

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DIRECTECH, INC

Nature of Debt (Purpose):
Caging & Data Processing

Mailing Address 8595 Grovemont Circle

City State ZIP Code
Gaithersburg MD 20877

Outstanding Balance Beginning This Period

223.11

Transaction ID: SD10.42032

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

223.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DIRECTECH, INC

Nature of Debt (Purpose):
Caging and Data Processing

Mailing Address 8595 Grovemont Circle

City State ZIP Code
Gaithersburg MD 20877

Outstanding Balance Beginning This Period

970.56

Transaction ID: SD10.63641

Amount Incurred This Period

0.00

Payment This Period

970.56

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DIRECTECH, INC

Nature of Debt (Purpose):
CAGING AND DATA ENTRY

Mailing Address 8595 Grovemont Circle

City State ZIP Code
Gaithersburg MD 20877

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.64046

Amount Incurred This Period

1757.19

Payment This Period

0.00

Outstanding Balance at Close of This Period

1757.19

1) **SUBTOTALS** This Period This Page (optional).....

1980.30

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Campaign for Working Families**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MWM Direct Marketing ServicesNature of Debt (Purpose):
Direct Mail

Mailing Address 8048 Hillrise Court

City State ZIP Code
Elkridge MD 21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID: SD10.15344

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PINNACLE LIST CO.

Nature of Debt (Purpose):

Mailing Address 2800 Shirlington Road
9th FloorCity State ZIP Code
Arlington VA 22206

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.64049

Amount Incurred This Period

2954.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

2954.01

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Seckman PrintingNature of Debt (Purpose):
Printing & Mailing

Mailing Address 305 Enterprise Drive

City State ZIP Code
Forest VA 24551

Outstanding Balance Beginning This Period

-450.00

Transaction ID: SD10.15354

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-450.00

1) SUBTOTALS This Period This Page (optional).....

4824.91

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 / 26

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Campaign for Working Families**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LUKENS COMPANY'Nature of Debt (Purpose):
Direct MailMailing Address 2800 Shirlington Road
9th FloorCity State ZIP Code
Arlington VA 22206

Outstanding Balance Beginning This Period

1022.32

Transaction ID: SD10.15340

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1022.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LUKENS COMPANY'Nature of Debt (Purpose):
Credit for Error in Billi-
ngMailing Address 2800 Shirlington Road
9th FloorCity State ZIP Code
Arlington VA 22206

Outstanding Balance Beginning This Period

-1022.32

Transaction ID: SD10.15509

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-1022.32

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LUKENS COMPANY'Nature of Debt (Purpose):
PAC - DIRECT MAIL CONSULT-
INGMailing Address 2800 Shirlington Road
9th FloorCity State ZIP Code
Arlington VA 22206

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.64050

Amount Incurred This Period

2425.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2425.00

1) SUBTOTALS This Period This Page (optional).....

2425.00

2) TOTALS This Period (last page this line number only).....

9230.21

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)